## Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	12/11/08	. Address;	<u>Rural</u>
Case #:	<u>43I°26572</u>		5590 N 400E
County:	Jackson/36		Cortland, IN 47228
Type of Laboratory Seizure (check one)  Operational Lab		Seizure Location (check all that apply)  Residence Ilotel/Motel	
Dumpsi	al/Glassware/Equipment (only) itc (only)	☐ Outbuilding ☐ Vehicle	Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)   (check all that apply)   Lithium/Ammonia Reaction(s):   Red Phosphorous/Iodine Reaction(s):   Flammable Solvents:   Water Reactive Metal (Lithium):   Anhydrous Ammonia: two partially filled carry tanks/pressurized/open air.   Hydrochloric Acid Gas Generator(s):   Corrosive Acid:   Corrosive Base:			
Child under age 18 discovered (check one)       Investigative Information         ☐ Yes (number present)       ☐ Ephedrine/Pseudoephedrine Tracking Log         ☐ No       ☐ Retail/Merchant Tip         *If yes, fax report to Child Protective Services       ☐ Other: Other Agency Assist         This report is to be faxed to the following agencies that serve the location:         Fire Department: Hamilton Twnshp Fire Dept.       Fax: (812) 497-2130         Health Department: Jackson County       Fax: (812) 522-6474         Child Protection Service: Jackson County       Fax: (812) 358-2421			
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Trp. Rick Hewitt Phone (812) 522-1441			

- This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

  This form is to be included with the ease file, and a copy sent to the Clandestine Laboratory Team Leader for retention,